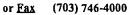
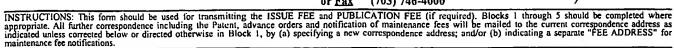
## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

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| CURRENT CORRESPONDENCE  | E ADDRESS (Note: Use Block 1 for  | any change of address)   |  | Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying |   |  |  |  |  |
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|   | 90 12/28/2004   | / 0 2  | 1  | have its own certificate  | e of mailing or transmission.   |  |  |  |  |
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| PERKASIE, PA 18   | 944   | D JAN 6 3 ZEED   |  | transmitted to the USP  |   | ng deposited with the United<br>rst class mail in an envelope<br>s above, or being facsimile<br>date indicated below.                                      |  |  |  |
|   |   | The state of the s | <i>47</i>  | HULLARA   | EISENBERG   | (Depositor's name)   |  |  |  |
|   |   | + m " U = r & U Cope   |  | HEU   | w   | (Signature)  |  |  |  |
|   |   |  |  | DECEN   | BER 30, 2004  | (Date)   |  |  |  |
| APPLICATION NO.   | FILING DATE   | FIRST NAME   | ED INVEN   | TOR   | ATTORNEY DOCKET NO.   | CONFIRMATION NO.   |  |  |  |
| 10/033,835  | 12/24/2001  | Yunil  | k Chang  |   | HME/7679.012  | 9339   |  |  |  |
| TITLE OF INVENTION: A   | QUEOUS COMPOSITIONS   | CONTAINING METRONID  | AZOLÉ  | 01/04/2005 BA   | BRAHA2 00000058 100   | 33835  |  |  |  |
|   |   |  | :  | 01 FC:1501  |   | 1400.00 OP   |  |  |  |
|   |   | ;  | 02 FC:1504   |   | 300.00 OP   |  |  |  |  |
| APPLN: TYPE   | SMALL ENTITY  | ISSUE FEE  | PL   | 03 FC+8001<br>JBLICATION FEE  | TOTAL FEE(S) DUE  | 30.00 gp.<br>DXTE DUE  |  |  |  |
| nonprovisional  | YES   | \$700  |  | \$300   | \$1000  | 03/28/2005   |  |  |  |
| EXAM  | IINER   | ART UNIT   | C  | ASS-SUBCLASS  | 1   |  |  |  |  |
| <del></del>   | LEIGH C   | 1623   |  | 514-058000  | J '   |  |  |  |  |
|   |   |  |  | <del> </del>  | · · · · · · · · · · · · · · · · · · ·   |  |  |  |  |
| 1. Change of correspondence CFR 1.363).   | e address or indication of "Fe  |  | _  | the patent front page, li<br>up to 3 registered pater   | HOWAK   | EISENBERG, ESO   |  |  |  |
| Change of correspond  | lence address (or Change of 22) attached.   | Correspondence or agents   | OR, alter  | matively,   | •   | •  |  |  |  |
|   |   | 1 (2) 410 14   | ame of a :   | single firm (having as a  | n member a 2————  | <del></del>  |  |  |  |
| "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.   |   |  | (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. |   |   |  |  |  |  |
|   |   | E PRINTED ON THE PATEN   |  | • •   |   |  |  |  |  |
| PLEASE NOTE: Unless recordation as set forth in   | an assignce is identified be 37 CFR 3.11. Completion  | clow, no assignce data will ap<br>of this form is NOT a substitute   | pear on t<br>e for filin   | he patent. If an assign<br>g an assignment,   | nee is identified below, the  | document has been filed for  |  |  |  |
| (A) NAME OF ASSIGN  | EE  | (B) RESIDEN  | B) RESIDENCE: (CITY and STATE OR COUNTRY)  |   |   |  |  |  |  |
| DOW PHARMA  | EUTICAL SCIENC  | es pet   | ALUM   | IA, CALIFOR   | NIA   |  |  |  |  |
| Please check the appropriate  | assignee category or catego   | ries (will not be printed on the   | patent)  | ☐ Individual  ☐ C   | orporation or other private g   | roup entity Government   |  |  |  |
| 4a. The following fee(s) are  | enclosed:   | 4b. Payment o  |  | ` .   |   |  |  |  |  |
| Issue Fee   |   | A check in the amount of the fee(s) is enclosed.   |  |   |   |  |  |  |  |
| Publication Fee (No s   |   |  | t card. Form PTO-2038  |   |   |  |  |  |  |
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| 5. Change in Entity Status  | (from status indicated above  | :)   |  |   | <u> </u>  | · · · · · · · · · · · · · · · · · · ·  |  |  |  |
|   | MALL ENTITY status. See   | 37 CFR 1.27. 💢 þ. Appli  | icant is no  | longer claiming SMA   | LL ENTITY status, See 37 (  | CFR 1.27(g)(2).  |  |  |  |
| The Director of the USPTO<br>NOTE: The Issue Fee and P<br>interest as shown by the reco   | is requested to apply the Issuablication Fee (if required) vords of the United States Pate  | ue Fee and Publication Fee (if a will not be accepted from anyonent and Trademark Office.  | any) or to<br>ne other th  | re-apply any previous<br>han the applicant; a reg   | y paid issue fee to the applic<br>istered attorney or agent; or   | cation identified above.<br>the assignee or other party in   |  |  |  |
| Authorized Signature  | A Com   |  |  |   |   | 2004   |  |  |  |
| Typed or printed name _   | HOWARD EISC   |  | _  | Registration  |   |  |  |  |  |
| This collection of informatic<br>an application. Confidential<br>submitting the completed at<br>this form and/or suggestions<br>Box 1450, Alexandria, Virg<br>Alexandria, Virginia 22313- | in is required by 37 CFR 1.3<br>ty is governed by 35 U.S.C<br>pplication form to the USPT<br>for reducing this burden, st<br>inia 22313-1450. DO NOT<br>1450. | 11. The information is required 122 and 37 CFR 1.14. This condition of the Chief Information on the Chief Information of the Chief Information of the Complete Send FEES OR COMPLETE   | to obtain<br>ollection<br>upon the<br>rmation C<br>D FORM  | n or retain a benefit by is estimated to take 12 individual case. Any conflicer, U.S. Patent and IS TO THIS ADDRESS   | the public which is to file (a<br>minutes to complete, includ<br>omments on the amount of to<br>Trademark Office, U.S. De<br>S. SEND TO: Commissioner | nd by the USPTO to process)<br>ing gathering, preparing, and<br>ing syn require to complete<br>partment of Commerce, P.O.<br>r for Patents, P.O. Box 1450, |  |  |  |

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PTO/SB/21 (09-04) Approved for use through 07/31/2006. OMB 0651-0031 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Inder the Paperwork Reduction Act of 1995. no persons are required to respond to a collection of information unless it displays a valid OMB control number. Application Number ELENT & IBAT 10/033.835 Filing Date TRANSMITTAL December 24, 2001 **FORM** First Named Inventor Yunik Chang Art Unit 1623 **Examiner Name** Maier, Leigh C. (to be used for all correspondence after initial filing) Attorney Docket Number HME/7679.012 Total Number of Pages in This Submission **ENCLOSURES** (Check all that apply) After Allowance Communication to TC **√** Fee Transmittal Form Drawing(s) Appeal Communication to Board Licensing-related Papers Fee Attached of Appeals and Interferences Appeal Communication to TC Petition Amendment/Reply (Appeal Notice, Brief, Reply Brief) Petition to Convert to a **Proprietary Information** After Final Provisional Application Power of Attorney, Revocation Status Letter Affidavits/declaration(s) Change of Correspondence Address Other Enclosure(s) (please Identify Terminal Disclaimer Extension of Time Request below): Issue Fee Transmittal Form with Issue Fee Request for Refund **Express Abandonment Request** CD, Number of CD(s) Information Disclosure Statement Landscape Table on CD Certified Copy of Priority Remarks Document(s) Reply to Missing Parts/ Incomplete Application Reply to Missing Parts under 37 CFR 1.52 or 1.53 SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT Firm Name Howard Eisenberg, Esq. Signature Printed name Howard Eisenberg Date Reg. No. December 30, 2004 36.789 CERTIFICATE OF TRANSMISSION/MAILING I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below: Signature Date December 30, 2004 Howard Eisenberg Typed or printed name

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PTO/SB/17 (12-04v2)

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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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| Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).  FEE TRANSMITTAL  For FY 2005  |  |                |                      |                     | Complete if Known                          |                 |                    |                                |                    |  |  |
|   |  |                |                      |                     | Application Number                         |                 | 10/033,835         |                                |                    |  |  |
|   |  |                |                      |                     | Filing Date                                |                 | December 24, 2001  |                                |                    |  |  |
|   |  |                |                      |                     | First Named Inventor                       |                 | Yunik Chang        |                                |                    |  |  |
|   |  |                |                      |                     | Examiner Name                              |                 | Maier, Leigh C.    |                                |                    |  |  |
| Applicant claims small entity status. See 37 CFR 1.27   |  |                |                      |                     | Art Unit                                   |                 | 1623               |                                |                    |  |  |
| TOTAL AMOUNT OF PAYMENT (\$) 1730   |  |                |                      |                     | Docket No.                                 | HME/7679.012    |                    |                                |                    |  |  |
| METHOD OF PAYMENT (check all that apply)  |  |                |                      |                     |  |                 |                    |                                |                    |  |  |
| ✓ Check Credit Card Money Order None Other (please identify):   |  |                |                      |                     |  |                 |                    |                                |                    |  |  |
| Deposit Account Deposit Account Number: 50-1773  Deposit Account Name: Howard Eisenberg   |  |                |                      |                     |  |                 |                    |                                |                    |  |  |
| For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)  |  |                |                      |                     |  |                 |                    |                                |                    |  |  |
| Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee  |  |                |                      |                     |  |                 |                    |                                |                    |  |  |
| Charge any additional fee(s) or underpayments of fee(s)   |  |                |                      |                     |  |                 |                    |                                |                    |  |  |
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| information and authorization on PTO-2038.  |  |                |                      |                     |  |                 |                    |                                |                    |  |  |
| FEE CALCUL  | ATION  |                |                      |                     |  |                 |                    |                                |                    |  |  |
| 1. BASIC FILI   | NG, SEARCH, A  | ND EXAM        |                      |                     | 5 EVA                                      | *****           |                    |                                |                    |  |  |
|   |  | Small E        |                      | RCH FEES<br>Small E |  | NINATIO<br>Smal | N FEES<br>I Entity |                                |                    |  |  |
| Application   |  |                |                      | (\$) Fee (          | \$) Fee                                    | (\$) <u>Fe</u>  | e (\$)             | Fees Paid (\$)                 | 1                  |  |  |
| Utility   | 300  |                | 500                  |                     | 200  | -               | 00                 |                                | _                  |  |  |
| Design  | 200  |                | 100                  |                     | 130  | •               | 55                 |                                | -                  |  |  |
| Plant   | 200  |                | 300                  | .50                 | 160  | 1               | 30                 | ···                            | -                  |  |  |
| Reissue   | 300  |                | 500                  | 250                 | 600  | ) 30            | 00                 |                                | -                  |  |  |
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| 2. EXCESS C<br>Fee Descripti  |  | na Daissua     | a)                   |                     |  | 1               | Fee (\$)<br>50     | Small Entity<br>Fee (\$)<br>25 |                    |  |  |
|   |  |                |                      |                     |  | 200             | 100                |                                |                    |  |  |
| Each independent claim over 3 (including Reissues) Multiple dependent claims  |  |                |                      |                     |  |                 | 360                | 180                            |                    |  |  |
| Total Claims  | -  | <u>Claims</u>  |                      | ee Paid (\$)        |  |                 |                    | endent Claims                  |                    |  |  |
|   | - 20 or HP = x = HP = highest number of total claims paid for, if greater than 20. |                |                      |                     |  |                 | <u>Fee (\$)</u>    | Fee Paid (\$)                  |                    |  |  |
| Indep. Claims   | Extra  | Claims         |                      | e Paid (\$)         |  | _               | <del> </del>       |                                |                    |  |  |
| -3 or HP = x = HP = highest number of independent claims paid for, if greater than 3.   |  |                |                      |                     |  |                 |                    |                                |                    |  |  |
| 3. APPLICATION SIZE FEE   |  |                |                      |                     |  |                 |                    |                                |                    |  |  |
| If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 |  |                |                      |                     |  |                 |                    |                                |                    |  |  |
| sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).   |  |                |                      |                     |  |                 |                    |                                |                    |  |  |
| Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$)   |  |                |                      |                     |  |                 |                    |                                |                    |  |  |
|   |  |                |                      |                     |  |                 |                    |                                |                    |  |  |
| 4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount)  Fees Paid (\$)   |  |                |                      |                     |  |                 |                    |                                | 7 (2)              |  |  |
| Other (e.g., late filing surcharge): Issue Fee, Publication Fee, 10 Copies of Patent 1730   |  |                |                      |                     |  |                 |                    |                                |                    |  |  |
| SUBMITTED BY  |  |                |                      |                     |  |                 |                    |                                | =                  |  |  |
| ignature  | A Few  |                |                      | Registratio         | Registration No.<br>Attorney/Agent) 36,789 |                 |                    | Telephone (215) 453-9237       |                    |  |  |
| Iomo (Brint/Tuno)   | Howard Figure  |                |                      | Li morrieyiAt       | , ,  |                 | <del> </del>       | ember 30, 2004                 |                    |  |  |

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